PART B -FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450

or Fax (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

as indicated unless corrected belo for maintenance fee notifications	ow or directed oth	erwise in Bloc	k I, by (a) spo	nd notificati ecifying a ne	on of maintena w corresponder	nce fees will be nce address; and/	mailed to th or (b) indica	e current correspondence address ting a separate "FEE ADDRESS"
CONNOLLY BOVE LODGE & HUTZ LLP 1875 Eye Street, NW Suite 1100 Washington, DC 20006					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission. I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facismite transmitted to the UNPTO (571) 273-2885, on the date indicated below.			
					-			(Depositor's name)
								(Junior)
APPLICATION NO. FI	LING DATE		FIRST NAM	ED INVEN	FOR	ATTORNEY I	OCKET NO	
	04/19/2006			er Papp		13111-00		1949
TITLE OF INVENTION: STABILIZATION OF HYDROFORMYLATION CATALYSTS BASED ON PHOSPHORAMIDE LIGANDS								
APPLN. TYPE SM	ALL ENTITY	ISSUE		PUBLIC.	ATION FEE	TOTAL FEE		DATE DUE
nonprovisional no		\$1,740.00			00.00	\$2,040.	00	12/30/2011
EXAMINER J. M. Nolan		ART UNIT 1626			SUBCLASS 454000	J		
1. Change of correspondence address or indication of "Fee Address" (17 Fer J. 33). Change of correspondence address (or Change of Correspondence Address from PTOS/B1/22) and the Address (or								
4a. The following fee(s) are enclosed: 4b. Payment A check in the					. ,	(s) is enclosed		
X Issue Fee								
Advance Order # of Copies The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 22-0185								
5. Change in Entity Status (fr a. Applicant claims SM The Director of the USPTO is requ NOTE: The Issue Fee and Publica interest as shown by the records of	ALL ENTITY sta ested to apply the I tion Fee (if require	tus. See 37 CF ssue Fee and Po d) will not be a	iblication Fee ((if any) or to	re-apply any pro	viously paid issue	fee to the ap	status. See 37 CFR 1.27(g)(2). plication identified above. nt; or the assignee or other party in
Authorized Signature /Georg M. Hasselmann/						Date	D	ecember 29, 2011
Typed or printed name	Typed or printed name Georg M. Hasselmann					_	tion No.	